

Alameda County Sheriff's Office

Gregory J. Ahern, Sheriff / Coroner Coroner's Bureau, 2901 Peralta Oaks Ct, Oakland, CA 94605 (510) 382-3000 / (510) 382-3033 (fax)

Coroner Investigator's Report

0			ED (LAST, FIRST MID	DLE)		TENTATIVE ID	UNIDEN	TIFIED		CASE NUMBER		
보 보	LUONG, Dat Thanh								2016-03015			
=	REPORTED BY			REPORTED BY PHONE NO.		REPORTING AGENCY			REFERENCE NUMBER			
CALL INFO	R. Lopez #1592			(510) 667-3646		Alameda County Sheriff's Office-ETS				16-017943		
S	INVESTIGATOR			CALL DATE AND TIME		CASE TYPE						
	Adam Neils			10/11/2016 10:50		Removal Case GENDER RACE MARITAL				OTATUO	VET?	
ENT	DATE AND TIME OF DEATH			DATE OF BIRTH		AGE GENDER RACE			Marrie		VEI	
	10/11/2016 9:10 HGT WGT EYE COLOR			3/4/1960 HAIR COLOR	56 Years	Male	Vieti	namese EMPLOYER	a			
	64	140	Brown	Black	occon more		EMPEOTER					
		140	Blown	Black				L. L				
DECEDENT	Preliminary Summary											
	LOCATION Santa R		ſ	•					LOD	TYPE ner		
	ADDRESS	(STREET,	CITY, STATE, ZIP)				COUNTY	,				
	5325 Broder Blvd. HU 9 B Pod Dublin CA 94568 Alameda											
					Death C	n Certificate Signed By:						
DEATH	Cause A ASPHYXIATION Interval Minutes											
)E/	Cause B STRANGULATION Interval Minutes											
	Cause C Interval											
	Cause D Interval											
	Other Significant Conditions											
7	LEGAL NEX	CT OF KIN			RELATIO	DNSHIP		TELEPH	ONE NO.			
0												
FICATION	NOTIFIED BY				METHOD			DATE AN	DATE AND TIME			
NOT	IDENTIFICATION METHOD Other				DATE AND TIME 10/11/201 9:10				A CONTRACTOR OF THE CONTRACTOR			
	LOCATION OF INCIDENT AT WORK											
INCIDENT	ADDRESS (STREET, CITY, STATE, ZIP) COUNTY DATE AND TIME OF INCIDE							DENT				
Z	INVESTIGATING AGENCY				INV A	INV AGENCY PHONE NUMBER			OFFICER			
	Alameda County Sheriff's Office-ETS					R. Lopez						
	FUNERAL HOME					BODY RELEASED TO FUNERAL HOME ON						
DISP	Chapel of The Chimes - Hayward					10/22/2016 8:41						
ā					pection w/Specime		EXAM BY					
						Micha	Michael Ferenc					



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Investigator Narrative

Decedent: Case Number: LUONG, Dat Thanh

2016-03015 Adam Neils

Case Number Investigator:

First Call Information:

On Tuesday, October 11, 2016, about 1050 hours, Alameda County Sheriff's Office Homicide Detective A. Moschetti #1808 called and reported the death of Dat Luong, an inmate at Santa Rita Jail. Detective Moschetti reported the following: At 0910 hours, Luong was found inside his cell (H/U 9-Cell B14) unresponsive with a towel wrapped around his neck and multiple contusions to his face. ALCO Fire Engine #17 arrived and life saving measures were attempted, but failed and Luong was pronounced dead, at 0910 hours. According to Detective Moschetti, Luong was the victim of a homicide. (AN#1834)

Medical Summary:

Luong sustained multiple contusion to his head and face, and was found with a towel wrapped around his neck.

While at Santa Rita Jail, I (Neils) received a copy of Luong's medical records. I (Neils) placed the records into the case file. (AN#1834)

Description of the Death/Injury Scene:

On Tuesday, October 11, 2016, Luong was pronounced dead, just outside of Cell B-12, Housing Unit 9, at the Santa Rita Jail, located at 5325 Broder Boulevard, in the City of Dublin. Luong's injuries occurred inside Cell B-14, but Luong was moved outside the cell for life saving measures. Luong's jail cell, B14, was a small concrete room with a metal toilet, a concrete table and a concrete bunk bed. Luong shared the cell with another inmate, I (Neils) saw some blood stains on the concrete table, the wall, and the floor. (AN#1834)

Body Identification:

While on scene, I (Neils) received a copy of Luong's Alameda County Sheriff's Office Custody Card and I compared the photograph to the decedent and they appeared to match. (AN#1834)

On Thursday, October 13, 2016, I (Neils) received a fax from the Alameda County Central Identification Bureau (CIB) confirming fingerprints taken form Dat Luong. A comparison was made between the fingerprints of Luong, Dat DOB 03/04/1960 (Case # 2016-03015) to the fingerprints associated with PFN (Person File Number) with the name Luong, Dat DOB 03/04/1960 from the records and files of the Alameda County Sheriff's Office. The fingerprints were identified to have been made by the same subject. (AN#1834)

Next of Kin Investigation	Next	of Kin	Investig	gation:
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Luong was married to making her Luong's legal next of kin.



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On Tuesday, October 11, 2	016, about 1709 hours	, I (Neils) called		phone number which was
given to me by Detective N	loschetti. I spoke to	,		sister, and asked if
wife,	, was available.	stated	did	not speak English and she
would relay the information	n to her. I notified	of Luong's death	h and	stated she would translate
the information to	(AN#1834)			

Other Agency Reports:

Alameda County Sheriff's Office assigned Report #16-017943 to this case. (AN#1834)

On Sunday, November 20, 2016, I (Neils) received a copy of the Alameda County Sheriff's Office report and included it in the case file. (AN1834)

Property and Evidence:

All of Luong's clothing and any belongings on his body were processed and collected as evidence at the time of autopsy. I (Neils) issued coroner's receipt #37561 to Detective J. Armijo for Luong's body and property. (AN#1834)

Coroners Fees:

Luong appeared to be an innocent victim so the outstanding coroner fees on this case were \$67 for body preparation. (AN#1834)

As of Sunday, January 29, 2017, all Coroner's fees were outstanding. (AN#1834)

Investigative Details:

On Tuesday October 11, 2016, Deputy Hovda and I (Neils) arrived at Luong's death scene. As I (Neils) walked up the stairs in B-Pod, I saw Luong lying in the supine position on the upper-tier, just outside of Cell #12. Luong had two defibrillator pads attached to his chest area. Livor mortis and Rigor mortis were both absent. Luong appeared to have been assaulted; I saw multiple contusions to Luong's face and other bruising on Luong's upper body.

Luong appeared to have been assaulted inside the two man cell Luong was housed in, due to the blood on the walls and floor. I placed paper bags over Luong's hands and zip tied the bags closed. Deputy Hovda took digital photographs to document Luong's death scene.

Deputy Hovda and I (Neils) moved Luong to a gurney and into the Coroner's van for transportation to the Coroner's Bureau.

About 1450 hours, Deputy Hovda and I (Neils) returned to the Coroner's Bureau and processed Luong into the morgue. Deputy Hovda took intake photographs of Luong and later downloaded them along with the other case photographs to a CD/R and placed them in the case file.

On Wednesday, October 12, 2016 Coroner's Chief Pathologist Doctor M. Ferenc performed a full autopsy and determined Luong's cause of death was Asphyxiation due to Strangulation. (AN#1834)

On Saturday, October 22, 2016, Luong's body was released to Chapel of the Chimes Funeral Home. signed the mortuary's release form. (AN#1834)



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As of Tuesday, February 28, 2017, Luong's case indicated a Press hold. I (Neils) made multiple attempts to contact Deputy Moschetti for the removal of the press hold on Luong's case but had been unsuccessful. I (Neils) saw no reason the Press hold on Luong's case should have remained in place so I removed it. (AN#1834)

Findings:

On Sunday, January 29, 2017, I (Neils) reviewed this case for the purpose of establishing a manner of Luong's death. I (Neils) mannered this case to be a homicide based on my review of the scene, police report, Autopsy Protocol, and the physical evidence were consistent with this finding. Doctor Ferenc gave all indications Luong was intentionally asphyxiated which caused Luong's death. (AN#1834)

Supervisor Review:

On Monday, February 27, 2017, I (Sgt. R. Macintire) reviewed this case and found it to be complete. I concurred with the findings and approved this case for closure. (RM#1632)

Alameda County Sheriff's Office

Coroner's Bureau 2901 Peralta Oaks Court, 2nd Floor, Oakland, CA 94605-5319

Gregory J. Ahern, Sheriff

Director of Emergency Services Coroner - Marshal

MEMORANDUM

DATE:

October 12, 2016

FROM:

Michael Joseph Ferenc, M.D.

TO:

Case File 2016-03015

SUBJECT: AUTOR

AUTOPSY PROTOCOL

An autopsy was performed on the body of Dat Luong at the Coroner's Bureau, 2901 Peralta Oaks Court, Oakland, California, on October 12, 2016, at about 9:00 a.m.

FINDINGS

- 1) ASPHYXIAL INJURIES:
 - A. PETECHIAL HEMORRHAGES OF CONJUNCTIVAE
 - B. HEMORRHAGES IN
 - 1. ANTERIOR NECK STRAP MUSCLES
 - 2. ANTERIOR NECK SOFT TISSUES
 - C. RIGHT SUPERIOR THRYOID HORN FRACTURE.
- 2) BLUNT INJURIES:
 - A. HEAD INJURIES
 - 1. CONTUSIONS OF EYELIDS
 - 2. CONTUSION AND ABRASIONS ON FACE
 - 3. CONTUSION OF LEFT JAW
 - 4. CONTUSIONS AND LACERATION INSIDE LIPS
 - 5. CONTUSION ON RIGHT TIP OF TONGUE
 - 6. ABRASIONS AND CONTUSIONS OF FOREHEAD
 - 7. NO SKULL FRACTURES
 - 8. NO SIGNIFICANT INTRACRANIAL INJURIES
 - B. NO TRAUMA TO TORSO (EXCEPT CPR-RELATED)
 - C. CONTUSIONS TO HANDS.
- 3) NEPHROSCLEROSIS, SLIGHT.
- 4) HEPATIC FIBROSIS.
- 5) PROBABLE HEMOSIDERIN-LADEN MACROPHAGES IN DURA MATER.



Body of DAT LUONG

6) NO ALCOHOL OR DRUGS DETECTED IN BLOOD (CVT-16-10568).

CAUSE OF DEATH: ASPHYXIATION DUE TO STRANGULATION.

cc: EMS

District Attorney

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Body of DAT LUONG

1 CIRCUMSTANCES OF DEATH

- 2 This 56 year-old gentleman was an inmate at the Santa Rita
- 3 Jail. He was found dead inside his locked cell with evidence of
- 4 injuries, including asphyxia injuries. His cellmate was the
- 5 only other person in cell.

6 PRELIMINARY EXAMINATION

- 7 The unembalmed body of a middle-aged to older appearing man
- 8 is in a plastic pouch, is partially dressed, and has a properly
- 9 labeled identification tag. Paper bags are on the hands. Small
- 10 areas of dried blood are on his face and torso. A pair of
- 11 green, striped, pajama-like pants and a pair of grey socks are
- 12 present.
- 13 The fingernails of the hands vary from very short to over
- 14 3/8 inches long. No definite recent broken fingernails are
- 15 identified. The fingernail of the right hand's 3rd digit
- 16 (middle finger) is irregular-shaped but this appears to be an
- 17 old area of nail loss. Fingernail clippings are taken. On the
- 18 right hand are contusions (described below).
- 19 In the moustache hair of the left upper lip is a small
- 20 fabric pilling.
- 21 On the front and back of the torso are loose rare dark
- 22 straight hairs, a small green fiber, grey flecks consistent with

Body of DAT LUONG

23 paint chips, and small white flecks.

24

- 25 Samples from a sexual assault kit are collected by me.
- 26 All items of evidence collected are retained for police.
- 27 (Please refer to separate evidence log for details.)
- 28 RECENT INJURIES
- 29 Asphyxial injuries
- Moderate red petechiae are seen in the conjunctivae. Only
- 31 rare similar petechiae are seen in the gingiva.
- 32 Externally, the neck shows no injuries.
- Internally, foci of dark red-blue hemorrhage are seen in
- 34 the lower sternocleidomastoid muscles, the junction of the
- 35 thyrohyoid and cricohyoid muscles, and adjacent omohyoid
- 36 muscles, right side significant greater than left.
- 37 An over 3/4 inch in greatest dimension focus of moderate
- 38 red-blue hemorrhage is throughout the right thyro-hyoid muscle.
- 39 An about 1/4 to 3/8 inch of slight hemorrhage is seen in the
- 40 right crico-thyroid muscle.
- Dark blue hemorrhage is around the base of both superior
- 42 horns of the thyroid cartilage. The base of the right horn is
- 43 fractured.
- The hyoid bone shows hemorrhage around its right wing.

- 45 Increased mobility in this area probably represents non-fusion
- 46 of the bone segments rather than an acute fracture.
- Blunt injuries to the head and neck: The right upper eyelid
- 48 is swollen with a 2 x 1 inch purple-blue contusion. On the
- 49 lateral right upper eyelid are two, 1/8 to 1/4 inch, superficial
- 50 lacerations. An ill-defined, red-blue, about 3 inch contusion is
- 51 along the right temple area. The left upper eyelid shows a 1-1/2
- 52 x 1/2 inch purple-blue contusion. Along the medial left eyelid
- 53 is a 1/4 inch, superficial laceration. Scattered, 1/16 to 1/8
- inch red-tan abrasions are on the nose and upper cheeks.
- On the inside of the lower lip near the midline is a 1-1/4
- 56 x 1/4 inch laceration with surrounding 1-1/2 inch red-blue
- 57 contusion. Several 1/8 to 1/4 inch minimally hemorrhagic
- 58 lacerations of the gingiva of the lower lip are seen as well. An
- 59 about 3/8 to 1/2 inch laceration to the midline upper lip is
- 60 surrounded by an up to 1 inch slight red-blue contusion. An
- 61 about 1 inch contusion is on the right tip of the tongue.
- The left lateral cheek and left jaw are swollen. Near the
- 63 left angle of the jaw is a 1/4 inch red-tan abrasion. Incision
- 64 on the inside of the cheek shows the swelling to be due to dark
- 65 blue hemorrhage. No fractures are palpated in the left upper or
- 66 lower jaws.

- Above the medial left eyebrow is a transversely-oriented, 1
- 68 \times 1/16 inch, red-brown abrasion.
- On the medial left forehead beginning just above the
- 70 eyebrow is a faint, discontinuous, roughly linear, slightly
- 71 arcing, about 2-1/2 inch long, about 1/16 to 1/8 inch wide, red
- 72 contusion and red abrasion that extends to right upper forehead.
- 73 To the right of this abrasion is a very faint, about 2 inch in
- 74 greatest dimension area of red contusions. (The rough outline of
- 75 this injury is generally consistent with the outline of examples
- 76 of inmate's orange plastic shoes.)
- 77 Internally, the inner scalp of the calvarium shows
- 78 scattered, 1/2 to 2 inch diameter, 1/8 inch thick, dark blue
- 79 contusions most prominently over the right frontal-temporal
- 80 area. No skull fractures are identified. A very thin film of
- 81 dull red-brown liquid blood is over the left cerebral hemisphere
- 82 (This accounts for less than 5 mL of blood.). No injuries to
- 83 the leptomeninges or brain are identified.
- Injuries to the torso: No significant external or internal
- 85 injuries to the torso are identified except intercostal
- 86 hemorrhage and rib fractures consistent with cardiopulmonary
- 87 resuscitation.

- Injuries to the limbs: On the right hand, the 3rd-5th
- 90 digits (middle to little fingers) show purple red contusions
- 91 extending from roughly the knuckle joints to almost the tips of
- 92 the fingers. The middle phalangeal joints of these fingers are
- 93 slightly swollen. No fractures are identified on palpated.
- 94 Proximal to the knuckle of the left hand's 2nd digit
- 95 (pointer finger) is a faint, red-blue, 1/2 inch contusion. On
- 96 the middle phalangeal joint of the left hand's 3rd digit (middle
- 97 finger) is a 3/8 inch similar contusion. No fractures are
- 98 identified on palpated.
- 99 No limb fractures of the long bones are identified on
- 100 palpation and range of motion.
- The injuries and findings described above are not repeated.
- 102 EXTERNAL EXAMINATION
- 103 The body of a well-developed, well-nourished, fair-
- 104 complexion, Asian man appears older than the stated age of 56
- 105 years. He is 64 inches and 140 pounds. Rigor mortis is
- 106 moderate. Livor mortis is minimal to slight, posterior, red
- 107 blue, and fixed.
- The head shows no significant scars. The hair is black and
- 109 grey, straight, and up to 6 inches with partial balding. An
- 110 untrimmed moustache and an untrimmed beard are seen. Live lice

- 111 and nits are seen in the head hair and pubic hair. The eyelids,
- 112 sclerae, and conjunctivae show no other lesions except for
- 113 trauma. The eyes are brown with moderate arcus. The nose and
- 114 mouth show no lesions except for trauma. The teeth are in poor
- 115 to fair condition. The ears are intact.
- The neck shows no significant external trauma or scars. The
- 117 chest shows no significant trauma or scars. ECG and
- 118 cardioversion pads are on the torso. The breasts are of a man.
- 119 The abdomen shows no significant trauma or scars. The genitalia
- 120 are of a circumcised man.
- 121 The arms and forearms show no significant scars. Red-brown
- 122 scabbed-over small excoriations are on the shoulders and upper
- 123 arms, and are consistent with chronic scratching. ECG pads are
- 124 on the upper arms. The hands, fingers, and fingernails are
- 125 intact. The legs and feet show no significant trauma or scars.
- 126 The back shows no significant trauma. Small irregular-
- 127 shaped scars are on the lower back. The anus is unremarkable.

128 INTERNAL EXAMINATION

- BODY WALLS AND CAVITIES: The subumbilical fat pad is about
- 130 3/4 inches. The subcutaneous and breast tissues are
- 131 unremarkable. The pleural cavities are smooth and glistening,
- 132 have no significant adhesions, and contain minimal serous

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thrombi or emboli.

133 The pericardial sac is intact. The mediastinum is 134 unremarkable. The diaphragm is intact. The peritoneal cavity 135 scattered adhesions. The major organs are normally positioned. 136 CARDIOVASCULAR SYSTEM: The epicardium is smooth 137 glistening. The coronary arteries follow a right predominant 138 distribution and show minimal atherosclerosis. The heart is 300 myocardium is red-brown, normal texture, 139 The 140 The right ventricular free wall does not show any 141 significant increased fatty tissue or increased fibrous tissue. 142 The left and right ventricles are normal thickness. The chambers 143 are not dilated. The endocardium, chordae, and papillary The coronary sinus ostium is widely patent. 144 muscles are intact. 145 The foramen ovale is closed. The atrioventricular and semilunar valves are normally formed, show no lesions or vegetations, and 146 147 are appropriate for age. The aorta shows no atherosclerosis. 148 The venae cavae and great vessels show no thrombi or emboli. 149 PULMONARY SYSTEM: The right and left lungs are 320 and 300 150 The lungs are partially aerated, soft, pink to red, and 151 uniform with smooth glistening surfaces. The bronchi show no 152 significant lesions. The mucosa is tan to red tan. No 153 aspirated blood is seen. The vessels show no significant

- 155 HEPATOBILIARY SYSTEM: The liver is slightly firmer than
- 156 normal, red brown, 1740 grams, and uniform with smooth
- 157 glistening surfaces. The biliary tract is intact, and the
- 158 gallbladder contains about 25 mL of thin, dark green opaque
- 159 bile. The pancreas is lobulated, normal texture, without focal
- 160 lesions, and tan.
- 161 HEMATOPOIETIC SYSTEM: The spleen is normal texture,
- 162 uniform with a smooth capsule, dark red, and 290 grams. The
- 163 thymus gland is unremarkable for age. The lymph nodes are not
- 164 significantly enlarged and show no lesions. The bone marrow of
- 165 the ribs and calvarium is unremarkable for age.
- 166 GASTROINTESTINAL SYSTEM: The oropharynx, esophagus, and
- 167 stomach show no lesions. The stomach contains over 300 mL of
- 168 tan thick partially digested food material including chunks of
- 169 potato. The duodenum, jejunum, ileum, and large bowel show no
- 170 mucosal, mural, or serosal lesions. The mesentery is intact.
- 171 The appendix is very small and short.
- 172 GENITOURINARY SYSTEM: The adrenal glands are unremarkable.
- 173 The renal capsule strips with slight to moderate difficulty.
- 174 Each kidney is 160 grams. The cortices are red-brown, slightly
- 175 finely granular, normal thickness, and uniform with smooth
- 176 glistening surfaces. The calyces and collecting systems are not

Body of DAT LUONG

- 177 dilated and show no lesions. The pyramids and papillae are
- 178 intact. The ureters are patent to the empty bladder. The
- 179 bladder mucosa and wall are unremarkable. The prostate gland
- 180 shows slight tan-white nodular enlargement. The testes are
- 181 unremarkable for age.
- MUSCULOSKELETAL SYSTEM: The muscles show no diffuse
- 183 findings. Focally slight hemorrhage is associated with
- 184 fractures of the anterior-medial ribs bilaterally and is
- 185 consistent with cardiopulmonary resuscitation. The skeleton is
- 186 well developed and appropriate for age.
- 187 HEAD AND NERVOUS SYSTEM: The scalp is otherwise
- 188 unremarkable. The skull shows no fractures. The dura mater and
- 189 leptomeninges are otherwise unremarkable. The floor of the
- 190 skull and dural sinuses are intact. The circle of Willis shows
- 191 no aneurysms and no significant atherosclerosis. The brain is
- 192 1430 grams. The cerebral hemispheres, cerebellum, and brain
- 193 stem show no significant focal or diffuse lesions. The grey and
- 194 white matter, deep nuclei, cerebellar folia, and brain stem show
- 195 no significant diffuse or focal lesions. The pituitary gland is
- 196 intact.
- 197 ANTERIOR NECK STRUCTURES: The anterior neck muscles are
- 198 otherwise unremarkable. The thyroid gland is symmetrical, not

- 199 enlarged, normal texture, and red brown. The parathyroid glands The laryngeal cartilages and cricoid 200 are not identified. 201 cartilage are otherwise unremarkable. The still partially 202 cartilaginous right tip of the hypoid bone is not fused to the remainder of the bone. No hemorrhage is associated with this 203 204 finding, and it appears to be a normal anatomic variant and not 205 The hyoid bone is otherwise unremarkable. an injury. The 206 tracheal, laryngeal, and epiglottic mucosa are otherwise 207 unremarkable. The tongue shows no other lesions. The prevertebral fascia is intact. The cervical vertebrae are 208 intact. 209
- 210 SPECIMENS RETAINED: femoral vein blood, heart blood,
 211 vitreous humor, gastric contents, and liver. A full toxicology
 212 screen is requested.
- 213 Representative tissue sections are retained in formalin.
 214 Selected sections are submitted for processing.
- 215 OTHER STUDIES: None.
- 216 Any items of evidence collected are retained for police.
- 217 (Please refer to separate evidence log for details.)

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221

Michael Joseph Ferenc, M.D.



Case Name:

TOXICOLOGY NUMBER:

CVT-16-10568

Luong,

Dat

30 ml femoral blood & 5.5 ml vitreous humor each labeled "Luong, Dat; 2016-03015;

10/12/2016" **Specimen Description:**

Delivered by

Tricor

13-Oct-16 Date

Received by

Bill Posey

Date 13-Oct-16

Request: Complete Drug Screen

Agency Case # 2016-03015

Requesting Agency

Alameda Co. Coroner's Office Attn: Acct's Payable

2901 Peralta Oaks Ct., 2nd Floor Oakland CA 94605

Report To

Alameda Co. Coroner's Office Attn: Dr. Ferenc 2901 Peralta Oaks Ct., 2nd Floor

Oakland CA 94605

Specimen: Femoral Blood Sample

RESULTS

Complete Drug Screen: No common acidic, neutral or basic drugs detected. No Ethyl Alcohol detected.

10/24/10

B.L. POSEY S.N. KIMBLE Directors

October 18, 2016

1580 Tollhouse Road Clovis, California 93611 Phone (559) 323-9940 Fax (559) 323-7502

Alameda County Sheriff's Office

Coroner's Bureau 2901 Peralta Oaks Court, 2nd Floor, Oakland, CA 94605-5319



Gregory J. Ahern, Sheriff

Director of Emergency Services Coroner - Marshal

CASE NUMBER:	CASE NAME:		
2016-03015	DAT THANH LUONG		
PATHOLOGIST: Michael Joseph Ferenc	HISTOLOGICAL EXAMINATION		
whenaer Joseph Ference			

BRAIN: Section of hippocampus shows no neoplasia, inflammatory infiltrates, degenerative diseases, or trauma.

A section of dura mater shows minimal hemorrhage over a very thin cellular layer. Clusters of brown pigmented mononuclear cells are seen consistent with hemosiderin.

HEART: Sections of left and right ventricle show intact myocytes and no significant inflammatory infiltrates. Endocardial and epicardial surfaces and vessels are unremarkable.

LUNGS: Sections show slightly emphysematous parenchyma and no acute significant inflammatory infiltrates. Bronchial elements are unremarkable. No significant polarizable foreign material is seen.

LIVER: Section shows unremarkable hepatocytes and sinusoids. Portal triads are intact. Increased fibrous tissue is seen between central veins and portal areas.

KIDNEY: Section shows intact glomeruli, tubules, interstitium, and vessels. No significant polarizable foreign material is seen.

THYROID GLAND: Section shows variable-sized, pink colloid-filled follicles lined by flattened to cuboidal epithelium.

SKIN AND GINGIVA: Sections of skin from the head and gingiva of the lips show scattered areas of variable acute hemorrhage in the soft tissue and muscle.

Date Signature M.D.